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JC965 U.S. PTO

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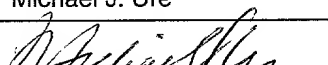
<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>  (Only for new nonprovisional applications under 37 CFR 1.53(b))	<b>Attorney Docket No.</b>	110411LDM.US
	<b>First Inventor</b>	SANDER
	<b>Title</b>	COMMUNICATIONS SIGNAL AMPLIFIERS HAVING INDEPENDENT POWER CONTROL AND AMPLITUDE MO
	<b>Express Mail Label No.</b>	EF240251206US

<b>APPLICATION ELEMENTS</b> <i>See MPEP chapter 600 concerning utility patent application contents.</i>	<b>ADDRESS TO:</b> Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i></p> <p>2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages 29] <i>(preferred arrangement set forth below)</i> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R &amp; D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure</p> <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 9]</p> <p>5. Oath or Declaration [Total Pages 3] a. <input checked="" type="checkbox"/> Newly executed (original or copy) Copy from a prior application (37 CFR 1.63 (d)) <i>(for continuation/divisional with Box 17 completed)</i> b. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p> <p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies</p>	
<b>ACCOMPANYING APPLICATION PARTS</b> 9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i> 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 16. <input type="checkbox"/> Other: .....	

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:  
☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. \_\_\_\_\_  
Prior application information. Examiner \_\_\_\_\_ Group / Art Unit: \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

<b>18. CORRESPONDENCE ADDRESS</b>					
<input type="checkbox"/> Customer Number or Bar Code Label			<input checked="" type="checkbox"/> Correspondence address below		
<div style="border: 1px solid black; padding: 2px; text-align: center;">(Insert Customer No. or Attach bar code label here)</div>					
Name	TROPIAN, INC.				
Address	ATTENTION: PATENT COUNSEL				
	20813 Stevens Creek Boulevard, Suite 150				
City	Cupertino	State	CA	Zip Code	95014-5649
Country		Telephone	(408) 865-1300	Fax	(408) 865-1385

Name (Print/Type)	Michael J. Ure	Registration No. (Attorney/Agent)	33,089
Signature			Date 04/11/01

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# FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ ) 1636

## Complete if Known

Application Number	
Filing Date	
First Named Inventor	SANDER
Examiner Name	
Group Art Unit	
Attorney Docket No.	110411LDM.US

## METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number: 50-1788

Deposit Account Name: TROPAN

☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

☐ Applicant claims small entity status See 37 CFR 1.27

2. ☐ Payment Enclosed:

☐ Check ☐ Credit card ☐ Money Order ☐ Other

## FEE CALCULATION

1. BASIC FILING FEE		Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Code (\$)				
101	710	201	355	Utility filing fee			710
106	320	206	160	Design filing fee			
107	490	207	245	Plant filing fee			
108	710	208	355	Reissue filing fee			
114	150	214	75	Provisional filing fee			
SUBTOTAL (1)						(\$ )	710

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
47	-20** = 27	X 18	= 486
8	-3** = 5	X 400	= 400
Multiple Dependent			= 886

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Code (\$)		
103	18	203	9	Claims in excess of 20	
102	80	202	40	Independent claims in excess of 3	
104	270	204	135	Multiple dependent claim, if not paid	
109	80	209	40	** Reissue independent claims over original patent	
110	18	210	9	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$ ) 886

\*\*or number previously paid, if greater, For Reissues, see above

## FEE CALCULATION (continued)

3. ADDITIONAL FEES		Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Code (\$)				
105	130	205	65	Surcharge - late filing fee or oath			
127	50	227	25	Surcharge - late provisional filing fee or cover sheet			
139	130	139	130	Non-English specification			
147	2,520	147	2,520	For filing a request for ex parte reexamination			
112	920*	112	920*	Requesting publication of SIR prior to Examiner action			
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action			
115	110	215	55	Extension for reply within first month			
116	390	216	195	Extension for reply within second month			
117	890	217	445	Extension for reply within third month			
118	1,390	218	695	Extension for reply within fourth month			
128	1,890	228	945	Extension for reply within fifth month			
119	310	219	155	Notice of Appeal			
120	310	220	155	Filing a brief in support of an appeal			
121	270	221	135	Request for oral hearing			
138	1,510	138	1,510	Petition to institute a public use proceeding			
140	110	240	55	Petition to revive - unavoidable			
141	1,240	241	620	Petition to revive - unintentional			
142	1,240	242	620	Utility issue fee (or reissue)			
143	440	243	220	Design issue fee			
144	600	244	300	Plant issue fee			
122	130	122	130	Petitions to the Commissioner			
123	50	123	50	Petitions related to provisional applications			
126	240	126	240	Submission of Information Disclosure Stmt			
581	40	581	40	Recording each patent assignment per property (times number of properties)			40
146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))			
149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))			
179	710	279	355	Request for Continued Examination (RCE)			
169	900	169	900	Request for expedited examination of a design application			
Other fee (specify)							
* Reduced by Basic Filing Fee Paid						SUBTOTAL (3)	(\$ ) 40

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Michael J. Ure	Registration No. (Attorney/Agent)	33,089
Signature		Telephone	(408) 865-1300
		Date	04/11/01

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